

**UPDATED APPLICATION DATA SHEET****Application Information**

|                                  |  |
|----------------------------------|--|
| Application number::             | 10/016,706   |
| Filing Date::                    | December 11, 2001  |
| Application Type::               | Regular  |
| Subject Matter::                 | Utility  |
| Suggested classification::       | N/A  |
| Suggested Group Art Unit::       | N/A  |
| CD-ROM or CD-R?::                | N/A  |
| Number of CD disks::             | N/A  |
| Number of copies of CDs::        | N/A  |
| Sequence submission?::           | N/A  |
| Computer Readable Form (CRF)?::  | N/A  |
| Number of copies of CRF::        | N/A  |
| Title ::                         | Biomaterial Based On An Insolublised<br>Dextran Derivative And a Growth Factor |
| Attorney Docket Number::         | 7594/84862   |
| Request for Early Publication?:: | No   |
| Request for Non-Publication?::   | No   |
| Suggested Drawing Figure::       |  |
| Total Drawing Sheets::           | 4  |
| Small Entity?::                  | Yes  |

|                                  |     |
|----------------------------------|-----|
| Latin name::                     | N/A |
| Variety denomination name::      | N/A |
| Petition included?::             | N/A |
| Petition Type::                  | N/A |
| Licensed US Govt. Agency::       | N/A |
| Contract or Grant Numbers::      | N/A |
| Secrecy Order in Parent Appl.?:: | N/A |

**Applicant Information**

|  |                    |
|--|--------------------|
| Applicant First Authority Type::       | Inventor           |
| Primary Citizenship Country::          | France             |
| Status::                               | Full Capacity      |
| Given Name::                           | Cinderella         |
| Middle Name::                          | N/A                |
| Family Name::                          | BLANCHAT           |
| Name Suffix::                          | N/A                |
| City of Residence::                    | Margency           |
| State or Province of Residence::       | France             |
| Country of Residence::                 | France             |
| Street of mailing address::            | 5, rue Paul Doumer |
| City of mailing address::              | Margency           |
| State or Province of mailing address:: | France             |

|   |                       |
|---|-----------------------|
| Country of mailing address::            | France                |
| Postal or Zip Code of mailing address:: | F-95580               |
| Applicant Second Authority Type::       | Inventor              |
| Primary Citizenship Country::           | France                |
| Status::                                | Full Capacity         |
| Given Name::                            | Delphine              |
| Middle Name::                           | N/A                   |
| Family Name::                           | LOGEART-AVRAMOGLOU    |
| Name Suffix::                           | N/A                   |
| City of Residence::                     | Groslay               |
| State or Province of Residence::        | France                |
| Country of Residence::                  | France                |
| Street of mailing address::             | 1B, rue Jules Vincent |
| City of mailing address::               | Groslay               |
| State or Province of mailing address::  | France                |
| Country of mailing address::            | France                |
| Postal or Zip Code of mailing address:: | F-95410               |
| Applicant Thrd Authority Type::         | Inventor              |
| Primary Citizenship Country::           | France                |
| Status::                                | Full Capacity         |
| Given Name::                            | Hervé                 |

**Middle Name::**

**Family Name::** PETITE

**Name Suffix::** N/A

**City of Residence::** Paris

**State or Province of Residence::** France

**Country of Residence::** France

**Street of mailing address::** 5, Cité Griset

**City of mailing address::** Paris

**State or Province of mailing address::** France

**Country of mailing address::** France

**Postal or Zip Code of mailing address::** F-75011

**Applicant Fourth Authority Type::** Inventor

**Primary Citizenship Country::** France

**Status::** Full Capacity

**Given Name::** Alain

**Middle Name::** N/A

**Family Name::** MEUNIER

**Name Suffix::** N/A

**City of Residence::** Saint-Mandé

**State or Province of Residence::** France

**Country of Residence::** France

|   |                        |
|---|------------------------|
| Street of mailing address::             | 19, rue Plisson        |
| City of mailing address::               | Saint-Mandé            |
| State or Province of mailing address::  | France                 |
| Country of mailing address::            | France                 |
| Postal or Zip Code of mailing address:: | F-94160                |
| Applicant Fifth Authority Type::        | Inventor               |
| Primary Citizenship Country::           | France                 |
| Status::                                | Full Capacity          |
| Given Name::                            | Frédéric               |
| Middle Name::                           | N/A                    |
| Family Name::                           | CHAUBET                |
| Name Suffix::                           | N/A                    |
| City of Residence::                     | Eaubonne               |
| State or Province of Residence::        | France                 |
| Country of Residence::                  | France                 |
| Street of mailing address::             | 4, rue de Bois-Jacques |
| City of mailing address::               | Eaubonne               |
| State or Province of mailing address::  | France                 |
| Country of mailing address::            | France                 |
| Postal or Zip Code of mailing address:: | F-95600                |

**Applicant Sixth Authority Type::** Inventor  
**Primary Citizenship Country::** France  
**Status::** Full Capacity  
**Given Name::** Jacqueline  
**Middle Name::** N/A  
**Family Name::** JOZEFONVICZ  
**Name Suffix::** N/A  
**City of Residence::** Lamorlaye  
**State or Province of Residence::** France  
**Country of Residence::** France  
**Street of mailing address::** 65, Deuxième Avenue  
**City of mailing address::** Lamorlaye  
**State or Province of mailing address::** France  
**Country of mailing address::** France  
**Postal or Zip Code of mailing address::** F-60260

**Applicant Seven Authority Type::** Inventor  
**Primary Citizenship Country::** France  
**Status::** Full Capacity  
**Given Name::** Marcel  
**Middle Name::** N/A  
**Family Name::** JOZEFOWICZ

|  |                                    |
|--|------------------------------------|
| <b>Name Suffix::</b>                           | <b>N/A</b>                         |
| <b>City of Residence::</b>                     | <b>Lamorlaye</b>                   |
| <b>State or Province of Residence::</b>        | <b>France</b>                      |
| <b>Country of Residence::</b>                  | <b>France</b>                      |
| <b>Street of mailing address::</b>             | <b>65, Deuxième Avenue</b>         |
| <b>City of mailing address::</b>               | <b>Lamorlaye</b>                   |
| <b>State or Province of mailing address::</b>  | <b>France</b>                      |
| <b>Country of mailing address::</b>            | <b>France</b>                      |
| <b>Postal or Zip Code of mailing address::</b> | <b>F-60260</b>                     |
| <br>   |                                    |
| <b>Applicant Eighth Authority Type::</b>       | <b>Inventor</b>                    |
| <b>Primary Citizenship Country::</b>           | <b>France</b>                      |
| <b>Status::</b>                                | <b>Full Capacity</b>               |
| <b>Given Name::</b>                            | <b>Laurent</b>                     |
| <b>Middle Name::</b>                           | <b>N/A</b>                         |
| <b>Family Name::</b>                           | <b>SEDEL</b>                       |
| <b>Name Suffix::</b>                           | <b>N/A</b>                         |
| <b>City of Residence::</b>                     | <b>Jouy en Josas</b>               |
| <b>State or Province of Residence::</b>        | <b>France</b>                      |
| <b>Country of Residence::</b>                  | <b>France</b>                      |
| <b>Street of mailing address::</b>             | <b>4, chemin de la Cour Roland</b> |
| <b>City of mailing address::</b>               | <b>Jouy en Josas</b>               |

|   |                      |
|---|----------------------|
| State or Province of mailing address::  | France               |
| Country of mailing address::            | France               |
| Postal or Zip Code of mailing address:: | F-78350              |
| Applicant Ninth Authority Type::        | Inventor             |
| Primary Citizenship Country::           | France               |
| Status::                                | Full Capacity        |
| Given Name::                            | José                 |
| Middle Name::                           | N/A                  |
| Family Name::                           | CORREIA              |
| Name Suffix::                           | N/A                  |
| City of Residence::                     | Saint Amand Les Eaux |
| State or Province of Residence::        | France               |
| Country of Residence::                  | France               |
| Street of mailing address::             | 1184, route de Lille |
| City of mailing address::               | Saint Amand Les Eaux |
| State or Province of mailing address::  | France               |
| Country of mailing address::            | France               |
| Postal or Zip Code of mailing address:: | F-59230              |



**Correspondence Information**

Name:: Welsh & Katz, Ltd.  
Street of mailing address:: 120 South Riverside Plaza, 22nd Floor  
City of mailing address:: Chicago  
State or Province of mailing address:: IL  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 60606-3945  
Phone number:: 312-655-1500  
Fax Number: 312-655-1501  
E-Mail address:: twtdocket@WelshKatz.com

**Representative Information**

|                                 |       |
|---------------------------------|-------|
| Representative Customer Number: | 24628 |
|---------------------------------|-------|

**Domestic Priority Information**

| Application:: | Continuity Type: | Parent Application:: | Parent Filing Date:: |
|---------------|------------------|----------------------|----------------------|
|               |                  |                      |                      |
|               |                  |                      |                      |

**Foreign Priority Information**

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
|           |                      |               |                    |
|           |                      |               |                    |

**Assignee Information**

Assignee name:: BIODEX  
Street of mailing address:: 637, rue Des Aulnoix  
City of mailing address:: St Amand Les Eaux  
State or Province of mailing address:: France  
Country of mailing address:: France  
Postal or Zip Code of mailing address:: 59230